

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF PUERTO RICO**

IN RE:

CASE NO 19-04547

GIOVANNI MARIN IRIZARRY  
WALESKA OLIVO SANTIAGO

CHAPTER 13

DEBTOR(S)  
\_\_\_\_\_ /

**AMENDMENT TO SCHEDULES**

**NOW COMES DEBTOR**, by and through the undersigned counsel and very respectfully alleges and prays as follows:

- 1. SCHEDULE A/B: TO CORRECT VALUE ON LINE 3.1, 17.3, 18, 20,33, AND 34.**
- 2. SCHEDULE C: TO CORRECT LINE 21,33,34,17.2 AND 17.3 .**
- 3. MEANS TEST: TO CORRECT LINE 15a, 15b, 16c, 18,19, 20a, 20b,20c,12,13b,13e,17,30,32,33b.**

**WHEREFORE**, the Debtor's respectfully request from this Honorable Court to take notice of the above mentioned and to Order any other remedy it deems appropriate.

**CERTIFICATE OF SERVICE**, I hereby certify that on this same date the foregoing motion was filed with the Clerk of the Court using the CM/ECF system, which will send notification of such filing to all CM/ECF participants and the Chapter 13 Trustee.

**RESPECTFULLY SUBMITTED**

In San Juan, Puerto Rico this 30th day of January 2020

**The Batista Law Group, PSC**

Jesus E. Batista Sanchez, Esq.

Attorney for Debtors

PO BOX 191059

SAN JUAN, P.R. 00919

Telephone: (787) 620-2856

Facsimile: (787) 777-1589

E-mail: [jeb@batistasanchez.com](mailto:jeb@batistasanchez.com)

**/s/ Jesus E. Batista Sánchez, Esq.**

USDC-PR No. 227014

Fill in this information to identify your case:

Debtor 1 GIOVANNI MARIN IRIZARRY  
First Name Middle Name Last Name

Debtor 2 WALESKA OLIVO SANTIAGO  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the District of Puerto Rico

Case number 19-04547-13  
(If known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ . Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X** /s/ GIOVANNI MARIN IRIZARRY

Signature of Debtor 1

**X** /s/ WALESKA OLIVO SANTIAGO

Signature of Debtor 2

Date 01/30/2020  
MM / DD / YYYY

Date 01/30/2020  
MM / DD / YYYY

Debtor 1 GIOVANNI MARIN IRIZARRY  
First Name Middle Name Last Name

Debtor 2 WALESKA OLIVO SANTIAGO  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of Puerto Rico

Case number 19-04547-13

☒ Check if this is an amended filing

## Official Form 106A/B

# Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☒ No. Go to Part 2.  
☐ Yes. Where is the property?

1.1. \_\_\_\_\_  
Street address, if available, or other description

\_\_\_\_\_  
City State ZIP Code

\_\_\_\_\_  
County

**What is the property?** Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

☐ Check if this is community property

If you own or have more than one, list here:

1.2. \_\_\_\_\_  
Street address, if available, or other description

\_\_\_\_\_  
City State ZIP Code

\_\_\_\_\_  
County

**What is the property?** Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

☐ Check if this is community property (see instructions)

1. \_\_\_\_\_

Street address, if available, or other description

City State ZIP Code

County

**What is the property?** Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

☐ **Check if this is community property** (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. \_\_\_\_\_ →

\$ 0.00

## Part 2: Describe Your Vehicles

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

### 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No  
☒ Yes

3.1. Make: HONDA  
 Model: CR-V  
 Year: 2018  
 Approximate mileage: 12000

Other information:

Lease. See Schedule G.

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☒ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ 19,000.00 \$ 0.00

If you own or have more than one, describe here:

3.2. Make: NISSAN  
 Model: TITAN  
 Year: 2018  
 Approximate mileage: 12000  
 Other information:

Condition: Good

**Who has an interest in the property?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ 19,000.00 \$ 19,000.00

\_\_\_\_. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Approximate mileage: \_\_\_\_\_  
 Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Approximate mileage: \_\_\_\_\_  
 Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

*Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No  
☐ Yes

4.1. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

If you own or have more than one, list here:

4.2. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here** .....



\$ 19,000.00

**Part 3: Describe Your Personal and Household Items**

**Do you own or have any legal or equitable interest in any of the following items?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.....

1. STOVE, 2. FRIDGE, 3. WASHER AND DRYER, 4. MICROWAVE, 5. KITCHEN UTENSILS, 6. KITCHEN APPLIANCES, 7. POTS AND PANS, 8. LIVING ROOM SET, 9. DINING ROOM SET, 10. CHAIRS AND TABLES, 11. DRAWERS AND NIGHT TABLES, 12. LAMPS AND ACCESORIES 13. LAWN MOWER

\$ 3,000.00

**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe.....

1. TV, 2. DVD 3. HOME COMPUTER 4. PRINTERS 5. CELLPHONES

\$ 2,000.00

**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe.....

\$ 0.00

**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No

☐ Yes. Describe.....

\$ 0.00

**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☐ No

☒ Yes. Describe.....

BAIKAL IZH-27 (2), FULTON FAR-15, BAIKAL IZH-18, COLT SUPER 38 AUTO, H&K USP 40, RUGER LC9, SIG SAUER P220R, COLT GOVERNMENT, ZZZ, REMINGTON 887, CENTURY ARMS M70, FRANCHI SPAS, GOLCK G17, GLOCK 43, S/W 500, FN HERSTAL SCAR 17S.

\$ 2,500.00

**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

CLOTHES AND SHOES AND WEARING APPAREL.

\$ 1,000.00

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe.....

WATCHES, RINGS AND JEWELRY MISC

\$ 700.00

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

☒ No

☐ Yes. Describe.....

\$ 0.00

**14. Any other personal and household items you did not already list, including any health aids you did not list**

☒ No

☐ Yes. Give specific information.....

\$ 0.00

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**



\$ 9,200.00

**Part 4: Describe Your Financial Assets**

**Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes ..... Cash: ..... \$ 60.00

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes ..... Institution name:

17.1. Checking account: BANCO POPULAR DE PR xx8232 \$ 50.00

17.2. Checking account: BANCO POPULAR DE PR xx8617 \$ 40.13

17.3. Savings account: \$

17.4. Savings account: \$

17.5. Certificates of deposit: \$

17.6. Other financial account: \$

17.7. Other financial account: \$

17.8. Other financial account: \$

17.9. Other financial account: \$

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

☐ No

☒ Yes .....

Institution or issuer name:

COOPERATIVA A/C CENTRO GUB. MINILLAS \$ 2,020.84

\$

\$

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☒ No

☐ Yes. Give specific information about them. ....

Name of entity:

% of ownership:

% \$

% \$

% \$

20. **Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☐ No

☒ Yes. Give specific information about them. ....

Issuer name:

AEELA RETIREMENT ACCOUNT DEBTOR 1	\$ 32,012.73
_____	\$ _____
_____	\$ _____

21. **Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No

☒ Yes. List each account separately. Institution name:  
 Type of account:

401(k) or similar plan:	_____	\$ _____
Pension plan:	SISTEMA DE RETIRO DEBTOR 1	\$ 75,418.68
IRA:	_____	\$ _____
Retirement account:	_____	\$ _____
Keogh:	_____	\$ _____
Additional account:	_____	\$ _____
Additional account:	_____	\$ _____

22. **Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes..... Institution name or individual:

Electric:	_____	\$ _____
Gas:	_____	\$ _____
Heating oil:	_____	\$ _____
Rental unit:	_____	\$ _____
Prepaid rent:	_____	\$ _____
Telephone:	_____	\$ _____
Water:	_____	\$ _____
Rented furniture:	_____	\$ _____
Other:	_____	\$ _____

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes..... Issuer name and description:

_____	\$ _____
_____	\$ _____
_____	\$ _____



**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes ..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

\_\_\_\_\_\$ \_\_\_\_\_  
 \_\_\_\_\_\$ \_\_\_\_\_  
 \_\_\_\_\_\$ \_\_\_\_\_

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No

☐ Yes. Give specific information about them. ...

\$ 0.00

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them. ...

\$ 0.00

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them. ...

\$ 0.00

**Money or property owed to you?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

Federal: \$ 0.00  
 State: \$ 0.00  
 Local: \$ 0.00

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information. ....

Alimony: \$ 0.00  
 Maintenance: \$ 0.00  
 Support: \$ 0.00  
 Divorce settlement: \$ 0.00  
 Property settlement: \$ 0.00

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information. ....

\$ 0.00

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance company of each policy and list its value. ... Company name: Beneficiary: Surrender or refund value:

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No

☐ Yes. Give specific information. .... \$ 0.00

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☐ No

☒ Yes. Describe each claim. .... CLAIM UNDER INVESTIGATION FOR VIOLATION OF AUTOMATIC STAY AGAINST AAA \$ 5,000.00

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

☐ No

☒ Yes. Describe each claim. .... CLAIM FOR VIOLATION OF TILA AND FDCPA AGAINST COOP GUBE, CLAIM FOR MEDICAL MALPRACTICE AGAINST DR. ELIZABETH PACHECO (DEBTOR SEEKS DAMAGES IN THE AMOUNT OF \$100,000.00; FOR VALUATION PURPOSES, CLAIM PRESENTLY VALUED AT \$10,000.00)., CLAIM FOR VIOLATION OF FDCPA AND TILA AGAINST HIMA \$ 20,000.00

**35. Any financial assets you did not already list**

☒ No

☐ Yes. Give specific information. .... \$ 0.00

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here** →

\$ 134,602.38

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

☒ No. Go to Part 6.

☐ Yes. Go to line 38.

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**

☐ No

☐ Yes. Describe ..... \$ \_\_\_\_\_

**39. Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☐ No

☐ Yes. Describe ..... \$ \_\_\_\_\_

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

☐ No  
☐ Yes. Describe ..... \$ \_\_\_\_\_

41. Inventory

☐ No  
☐ Yes. Describe ..... \$ \_\_\_\_\_

42. Interests in partnerships or joint ventures

☐ No  
☐ Yes. Describe ..... Name of entity: % of ownership:  
\_\_\_\_\_% \$ \_\_\_\_\_  
\_\_\_\_\_% \$ \_\_\_\_\_  
\_\_\_\_\_% \$ \_\_\_\_\_

43. Customer lists, mailing lists, or other compilations

☐ No  
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  
☐ No  
☐ Yes. Describe..... \$ \_\_\_\_\_

44. Any business-related property you did not already list

☐ No  
☐ Yes. Give specific information ..... \$ \_\_\_\_\_  
\_\_\_\_\_% \$ \_\_\_\_\_  
\_\_\_\_\_% \$ \_\_\_\_\_  
\_\_\_\_\_% \$ \_\_\_\_\_  
\_\_\_\_\_% \$ \_\_\_\_\_  
\_\_\_\_\_% \$ \_\_\_\_\_

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here →

\$ 0.00

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☐ No  
☐ Yes..... \$ \_\_\_\_\_

48. Crops—either growing or harvested

☐ No

☐ Yes. Give specific information. ....

\$ \_\_\_\_\_

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

☐ No

☐ Yes .....

\$ \_\_\_\_\_

50. Farm and fishing supplies, chemicals, and feed

☐ No

☐ Yes .....

\$ \_\_\_\_\_

51. Any farm- and commercial fishing-related property you did not already list

☐ No

☐ Yes. Give specific information. ....

\$ \_\_\_\_\_

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here .....



\$ 0.00

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No

☐ Yes. Give specific information. ....

54. Add the dollar value of all of your entries from Part 7. Write that number here .....



\$ 0.00

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2 .....



\$ 0.00

56. Part 2: Total vehicles, line 5

\$ 19,000.00

57. Part 3: Total personal and household items, line 15

\$ 9,200.00

58. Part 4: Total financial assets, line 36

\$ 134,602.38

59. Part 5: Total business-related property, line 45

\$ 0.00

60. Part 6: Total farm- and fishing-related property, line 52

\$ 0.00

61. Part 7: Total other property not listed, line 54

+ \$ 0.00

62. Total personal property. Add lines 56 through 61. ....

\$ 162,802.38

Copy personal property total ➔

+ \$ 162,802.38

63. Total of all property on Schedule A/B. Add line 55 + line 62. ....

\$ 162,802.38

## Fill in this information to identify your case:

Debtor 1	GIOVANNI MARIN IRIZARRY		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of Puerto Rico			
Case number (if known)	19-04547-13		

☒ Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

## Part 1: Identify the Property You Claim as Exempt

## 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Debtor 1 Exemptions	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption	
Brief description: Household goods - 1. STOVE, 2. FRIDGE, 3. WASHER AND DRYER, 4. MICROWAVE, 5. KITCHEN UTENSILS, 6. KITCHEN APPLIANCES, 7. POTS AND PANS, 8. LIVING ROOM SET, 9. DINING ROOM SET, 10. CHAIRS AND TABLES, 11. DRAWERS AND NIGHT TABLES, 12. LAMPS AND	\$ 3,000.00	<input checked="" type="checkbox"/> \$ 1,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Line from <i>Schedule A/B</i> : 6			
Brief description: Electronics - 1. TV, 2. DVD 3. HOME COMPUTER 4. PRINTERS 5. CELLPHONES	\$ 2,000.00	<input checked="" type="checkbox"/> \$ 1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Line from <i>Schedule A/B</i> : 7			
Brief description: Firearms - BAIKAL IZH-27 (2), FULTON FAR-15, BAIKAL IZH-18, COLT SUPER 38 AUTO, H&K USP 40, RUGER LC9, SIG SAUER P220R, COLT GOVERNMENT, ZZZ, REMINGTON 887, CENTURY ARMS M70, FRANCHI SPAS, GOLCK G17, COLT 40 CALIBER, ENFIELD 30.06, COLT 40	\$ 2,500.00	<input checked="" type="checkbox"/> \$ 2,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Line from <i>Schedule A/B</i> : 10			

## 3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

Debtor

GIOVANNI MARIN IRIZARRY

First Name

Middle Name

Last Name

Case number (if known) 19-04547-13

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: Clothing - CLOTHES AND SHOES AND WEARING APPAREL. Line from Schedule A/B: 11	\$ 1,000.00	<input checked="" type="checkbox"/> \$ 500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Brief description: Jewelry - WATCHES, RINGS AND JEWELRY MISC Line from Schedule A/B: 12	\$ 700.00	<input checked="" type="checkbox"/> \$ 350.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(4)
Brief description: CASH ON HAND (Cash On Hand) Line from Schedule A/B: 16	\$ 60.00	<input checked="" type="checkbox"/> \$ 30.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Brief description: BANCO POPULAR DE PR xx8232 (Checking) Line from Schedule A/B: 17.1	\$ 50.00	<input checked="" type="checkbox"/> \$ 50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Brief description: SISTEMA DE RETIRO DEBTOR 1 Line from Schedule A/B: 21	\$ 75,418.68	<input checked="" type="checkbox"/> \$ 74,055.54 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(12)
Brief description: CLAIM UNDER INVESTIGATION FOR VIOLATION OF AUTOMATIC STAY AGAINST AAA (owed to debtor) Line from Schedule A/B: 33	\$ 5,000.00	<input checked="" type="checkbox"/> \$ 2,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Brief description: CLAIM FOR VIOLATION OF TILA AND FDCPA AGAINST COOP GUBE (owed to debtor) Line from Schedule A/B: 34	\$ 5,000.00	<input checked="" type="checkbox"/> \$ 4,924.87 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Brief description: CLAIM FOR VIOLATION OF FDCPA AND TILA AGAINST HIMA (owed to debtor) Line from Schedule A/B: 34	\$ 5,000.00	<input checked="" type="checkbox"/> \$ 2,650.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

## Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
Debtor 2	WALESKA OLIVO SANTIAGO		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of Puerto Rico			
Case number (if known)	19-04547-13		

☒ Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

## Part 1: Identify the Property You Claim as Exempt

## 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Debtor 2 Exemptions	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption	
Brief description: Household goods - 1. STOVE, 2. FRIDGE, 3. WASHER AND DRYER, 4. MICROWAVE, 5. KITCHEN UTENSILS, 6. KITCHEN APPLIANCES, 7. POTS AND PANS, 8. LIVING ROOM SET, 9. DINING ROOM SET, 10. CHAIRS AND TABLES, 11. DRAWERS AND NIGHT TABLES, 12. LAMPS AND	\$ 3,000.00	<input checked="" type="checkbox"/> \$ 1,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Line from <i>Schedule A/B</i> : 6			
Brief description: Electronics - 1. TV, 2. DVD 3. HOME COMPUTER 4. PRINTERS 5. CELLPHONES	\$ 2,000.00	<input checked="" type="checkbox"/> \$ 1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Line from <i>Schedule A/B</i> : 7			
Brief description: Clothing - CLOTHES AND SHOES AND WEARING APPAREL.	\$ 1,000.00	<input checked="" type="checkbox"/> \$ 500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Line from <i>Schedule A/B</i> : 11			

## 3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

Debtor

WALESKA OLIVO SANTIAGO

First Name

Middle Name

Last Name

Case number (if known) 19-04547-13

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Jewelry - WATCHES, RINGS AND JEWELRY MISC			11 USC § 522(d)(4)
Brief description: _____	\$ 700.00	<input checked="" type="checkbox"/> \$ 350.00	
Line from Schedule A/B: 12		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
CASH ON HAND (Cash On Hand)			11 U.S.C. § 522 (d)(5)
Brief description: _____	\$ 60.00	<input checked="" type="checkbox"/> \$ 30.00	
Line from Schedule A/B: 16		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
BANCO POPULAR DE PR xx8617 (Checking)			11 U.S.C. § 522 (d)(5)
Brief description: _____	\$ 40.13	<input checked="" type="checkbox"/> \$ 40.13	
Line from Schedule A/B: 17.2		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
CLAIM UNDER INVESTIGATION FOR VIOLATION OF AUTOMATIC STAY AGAINST AAA (owed to debtor)			11 U.S.C. § 522 (d)(5)
Brief description: _____	\$ 5,000.00	<input checked="" type="checkbox"/> \$ 2,500.00	
Line from Schedule A/B: 33		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
CLAIM FOR MEDICAL MALPRACTICE AGAINST DR. ELIZABETH PACHECO (DEBTOR SEEKS DAMAGES IN THE AMOUNT OF \$100,000.00; FOR VALUATION PURPOSES, CLAIM PRESENTLY VALUED AT \$10,000.00). (owed to debtor)			11 U.S.C. § 522 (d)(5)
Brief description: _____	\$ 10,000.00	<input checked="" type="checkbox"/> \$ 10,000.00	
Line from Schedule A/B: 34		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
CLAIM FOR VIOLATION OF FDCPA AND TILA AGAINST HIMA (owed to debtor)			11 USC § 522(d)(5)
Brief description: _____	\$ 5,000.00	<input checked="" type="checkbox"/> \$ 1,000.00	
Line from Schedule A/B: 34		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
CLAIM FOR VIOLATION OF FDCPA AND TILA AGAINST HIMA (owed to debtor)			11 USC § 522(d)(5)
Brief description: _____	\$ 5,000.00	<input checked="" type="checkbox"/> \$ 1,325.00	
Line from Schedule A/B: 34		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____	
Line from Schedule A/B: _____		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____	
Line from Schedule A/B: _____		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____	
Line from Schedule A/B: _____		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____	
Line from Schedule A/B: _____		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____	\$ _____	<input type="checkbox"/> \$ _____	
Line from Schedule A/B: _____		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	



**Fill in this information to identify your case:**

Debtor 1 GIOVANNI MARIN IRIZARRY  
First Name Middle Name Last Name

Debtor 2 WALESKA OLIVO SANTIAGO  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of Puerto Rico

Case number 19-04547-13  
(If known)

**Check as directed in lines 17 and 21:**

According to the calculations required by this Statement:

- ☐ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
- ☒ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
- ☐ 3. The commitment period is 3 years.
- ☒ 4. The commitment period is 5 years.

☒ Check if this is an amended filing

## Official Form 122C-1

# Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

**Part 1: Calculate Your Average Monthly Income****1. What is your marital and filing status?** Check one only.

- ☐ **Not married.** Fill out Column A, lines 2-11.
- ☒ **Married.** Fill out both Columns A and B, lines 2-11.

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse																
<b>2. Your gross wages, salary, tips, bonuses, overtime, and commissions</b> (before all payroll deductions).	\$ 5,267.00	\$ 2,545.00																
<b>3. Alimony and maintenance payments.</b> Do not include payments from a spouse.	\$ 0.00	\$ 0.00																
<b>4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.</b> Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$ 0.00	\$ 0.00																
<b>5. Net income from operating a business, profession, or farm</b>	<table border="1"> <thead> <tr> <th>Debtor 1</th> <th>Debtor 2</th> </tr> </thead> <tbody> <tr> <td>Gross receipts (before all deductions)</td> <td>\$ 0.00 \$ 0.00</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>— \$ 0.00 — \$ 0.00</td> </tr> <tr> <td>Net monthly income from a business, profession, or farm</td> <td>\$ 0.00 \$ 0.00</td> </tr> </tbody> </table>	Debtor 1	Debtor 2	Gross receipts (before all deductions)	\$ 0.00 \$ 0.00	Ordinary and necessary operating expenses	— \$ 0.00 — \$ 0.00	Net monthly income from a business, profession, or farm	\$ 0.00 \$ 0.00	<table border="1"> <thead> <tr> <th>Debtor 1</th> <th>Debtor 2</th> </tr> </thead> <tbody> <tr> <td>Gross receipts (before all deductions)</td> <td>\$ 0.00 \$ 0.00</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>— \$ 0.00 — \$ 0.00</td> </tr> <tr> <td>Net monthly income from rental or other real property</td> <td>\$ 0.00 \$ 0.00</td> </tr> </tbody> </table>	Debtor 1	Debtor 2	Gross receipts (before all deductions)	\$ 0.00 \$ 0.00	Ordinary and necessary operating expenses	— \$ 0.00 — \$ 0.00	Net monthly income from rental or other real property	\$ 0.00 \$ 0.00
Debtor 1	Debtor 2																	
Gross receipts (before all deductions)	\$ 0.00 \$ 0.00																	
Ordinary and necessary operating expenses	— \$ 0.00 — \$ 0.00																	
Net monthly income from a business, profession, or farm	\$ 0.00 \$ 0.00																	
Debtor 1	Debtor 2																	
Gross receipts (before all deductions)	\$ 0.00 \$ 0.00																	
Ordinary and necessary operating expenses	— \$ 0.00 — \$ 0.00																	
Net monthly income from rental or other real property	\$ 0.00 \$ 0.00																	
	Copy here → \$ 0.00	Copy here → \$ 0.00																
<b>6. Net income from rental and other real property</b>	<table border="1"> <thead> <tr> <th>Debtor 1</th> <th>Debtor 2</th> </tr> </thead> <tbody> <tr> <td>Gross receipts (before all deductions)</td> <td>\$ 0.00 \$ 0.00</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>— \$ 0.00 — \$ 0.00</td> </tr> <tr> <td>Net monthly income from rental or other real property</td> <td>\$ 0.00 \$ 0.00</td> </tr> </tbody> </table>	Debtor 1	Debtor 2	Gross receipts (before all deductions)	\$ 0.00 \$ 0.00	Ordinary and necessary operating expenses	— \$ 0.00 — \$ 0.00	Net monthly income from rental or other real property	\$ 0.00 \$ 0.00	<table border="1"> <thead> <tr> <th>Debtor 1</th> <th>Debtor 2</th> </tr> </thead> <tbody> <tr> <td>Gross receipts (before all deductions)</td> <td>\$ 0.00 \$ 0.00</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>— \$ 0.00 — \$ 0.00</td> </tr> <tr> <td>Net monthly income from rental or other real property</td> <td>\$ 0.00 \$ 0.00</td> </tr> </tbody> </table>	Debtor 1	Debtor 2	Gross receipts (before all deductions)	\$ 0.00 \$ 0.00	Ordinary and necessary operating expenses	— \$ 0.00 — \$ 0.00	Net monthly income from rental or other real property	\$ 0.00 \$ 0.00
Debtor 1	Debtor 2																	
Gross receipts (before all deductions)	\$ 0.00 \$ 0.00																	
Ordinary and necessary operating expenses	— \$ 0.00 — \$ 0.00																	
Net monthly income from rental or other real property	\$ 0.00 \$ 0.00																	
Debtor 1	Debtor 2																	
Gross receipts (before all deductions)	\$ 0.00 \$ 0.00																	
Ordinary and necessary operating expenses	— \$ 0.00 — \$ 0.00																	
Net monthly income from rental or other real property	\$ 0.00 \$ 0.00																	
	Copy here → \$ 0.00	Copy here → \$ 0.00																

Debtor 1

GIOVANNI MARIN IRIZARRY  
First Name Middle Name Last Name

Case number (if known) 19-04547-13

Column A  
Debtor 1Column B  
Debtor 2 or  
non-filing spouse

## 7. Interest, dividends, and royalties


\$ 0.00

\$ 0.00

## 8. Unemployment compensation

\$ 0.00

\$ 0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 

For you \$ 0.00

For your spouse \$ 0.00

9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$ 0.00

\$ 0.00

10. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

Total amounts from separate pages, if any.

+ \$ 0.00

+ \$ 0.00

11. **Calculate your total average monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 5,267.00

+

\$ 2,545.00

= \$ 7,812.00

Total average  
monthly income**Part 2: Determine How to Measure Your Deductions from Income**

12. **Copy your total average monthly income from line 11.** \$ 7,812.00

13. **Calculate the marital adjustment.** Check one:

☐ You are not married. Fill in 0 below.

☒ You are married and your spouse is filing with you. Fill in 0 below.

☐ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

\$  
\$  
+ \$

Total

\$ 0.00

Copy here →

— 0.00

14. **Your current monthly income.** Subtract the total in line 13 from line 12.

\$ 7,812.00

Debtor 1

GIOVANNI MARIN IRIZARRY  
First Name Middle Name Last Name

Case number (if known) 19-04547-13

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here → ..... \$ 7,812.00  
Multiply line 15a by 12 (the number of months in a year). x 12  
15b. The result is your current monthly income for the year for this part of the form. ..... \$ 93,744.00

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live. PR  
16b. Fill in the number of people in your household. 3  
16c. Fill in the median family income for your state and size of household. ..... \$ 25,560.00  
To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

- 17a. ☐ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. Go to Part 3. Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).
- 17b. ☒ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. Go to Part 3 and fill out *Calculation of Your Disposable Income* (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.

Part 3:

Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

18. Copy your total average monthly income from line 11. ..... \$ 7,812.00  
19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  
19a. If the marital adjustment does not apply, fill in 0 on line 19a. ..... — \$ 0.00  
19b. Subtract line 19a from line 18. ..... \$ 7,812.00

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b. .... \$ 7,812.00  
Multiply by 12 (the number of months in a year). x 12  
20b. The result is your current monthly income for the year for this part of the form. ..... \$ 93,744.00  
20c. Copy the median family income for your state and size of household from line 16c. .... \$ 25,560.00

21. How do the lines compare?

- ☐ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.
- ☒ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Debtor 1

GIOVANNI MARIN IRIZARRY  
First Name Middle Name Last Name

Case number (if known) 19-04547-13

**Part 4: Sign Below**

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

**X** /s/ GIOVANNI MARIN IRIZARRY  
Signature of Debtor 1

**X** /s/ WALESKA OLIVO SANTIAGO  
Signature of Debtor 2

Date 01/30/2020  
MM / DD / YYYY

Date 01/30/2020  
MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

**Fill in this information to identify your case:**

Debtor 1 GIOVANNI MARIN IRIZARRY  
First Name Middle Name Last Name

Debtor 2 WALESKA OLIVO SANTIAGO  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of Puerto Rico

Case number 19-04547-13  
(If known)

☒ Check if this is an amended filing

## Official Form 122C-2

### Chapter 13 Calculation of Your Disposable Income

4/19

To fill out this form, you will need your completed copy of *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period* (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

**5. The number of people used in determining your deductions from income**

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

**National Standards** You must use the IRS National Standards to answer the questions in lines 6-7.

**6. Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,446.00

**7. Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor 1

GIOVANNI MARIN IRIZARRY

First Name Middle Name Last Name

Case number (if known) 19-04547-13

**People who are under 65 years of age**

7a. Out-of-pocket health care allowance per person \$ 55.00

7b. Number of people who are under 65 X 3

7c. Subtotal. Multiply line 7a by line 7b. \$ 165.00

Copy line 7c here → \$ 165.00

**People who are 65 years of age or older**

7d. Out-of-pocket health care allowance per person \$ 114.00

7e. Number of people who are 65 or older X

7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00

Copy line 7f here → + \$ 0.00

7g. **Total.** Add lines 7c and 7f. \$ 165.00 Copy total here → .....7g. \$ 165.00

**Local Standards**

You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

■ **Housing and utilities – Insurance and operating expenses**

■ **Housing and utilities – Mortgage or rent expenses**

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities – Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ 577.00

9. **Housing and utilities – Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$ 741.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average monthly payment
PROPERTY RENT	\$ 775.00
	\$
	+ \$ 0.00

9b. Total average monthly payment ..... \$ 775.00

Copy line 9b here → - \$ 775.00

Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

\$ 0.00

Copy 9c here → \$ 0.00

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. \$ 0.00

Explain why:

Debtor 1

GIOVANNI MARIN IRIZARRY

First Name

Middle Name

Last Name

Case number (if known) 19-04547-13

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

- ☐ 0. Go to line 14.  
☐ 1. Go to line 12.  
☒ 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

\$ 474.00

13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

**Vehicle 1** Describe Vehicle 1: 2018 NISSAN TITAN

13a. Ownership or leasing costs using IRS Local Standard 13a. \$ 508.00

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment
ORIENTAL BANK TRUST	\$ 753.00
	+ \$ 0.00
Total average monthly payment	\$ 753.00

Copy here →

— \$ 753.00

Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense

Subtract line 13b from line 13a. If this number is less than \$0, enter \$0. ....

\$ 0.00

Copy net Vehicle 1 expense here →

\$ 0.00

**Vehicle 2** Describe Vehicle 2: 2018 HONDA CR-V  
12000 miles

13d. Ownership or leasing costs using IRS Local Standard..... \$ 508.00

13e. Average monthly payment for all debts secured by Vehicle 2.

Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
	\$ 0.00
	+ \$ 0.00
Total average monthly payment	\$ 0.00

Copy here →

— \$ 0.00

Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense

Subtract line 13e from 13d. If this number is less than \$0, enter \$0. ....

\$ 508.00

Copy net Vehicle 2 expense here →

\$ 508.00

14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation.

\$ 0.00

15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

\$ 0.00

Debtor 1

GIOVANNI MARIN IRIZARRY

First Name

Middle Name

Last Name

Case number (if known) 19-04547-13

**Other Necessary Expenses**

In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. \$ 1,410.85  
Do not include real estate, sales, or use taxes.
17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. \$ 556.46  
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.
18. **Life insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. \$ 48.60  
Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.
19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. \$ 0.00  
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.
20. **Education:** The total monthly amount that you pay for education that is either required:  
☐ as a condition for your job, or \$ 0.00  
☐ for your physically or mentally challenged dependent child if no public education is available for similar services.
21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. \$ 0.00  
Do not include payments for any elementary or secondary school education.
22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. \$ 0.00  
Payments for health insurance or health savings accounts should be listed only in line 25.
23. **Optional telephones and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. + \$ 60.00  
Do not include payments for basic home telephone, internet or cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Form 22C-1, or any amount you previously deducted.
24. **Add all of the expenses allowed under the IRS expense allowances.** \$ 5,245.91  
Add lines 6 through 23.

**Additional Expense Deductions**

These are additional deductions allowed by the Means Test.

Note: Do not include any expense allowances listed in lines 6-24.

25. **Health insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance \$ 0.00

Disability insurance \$ 0.00

Health savings account + \$ 0.00

Total \$ 0.00

Copy total here → \$ 0.00

Do you actually spend this total amount?

☐ No. How much do you actually spend? \$ \_\_\_\_\_

☒ Yes

26. **Continuing contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). \$ 150.00
27. **Protection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. \$ 0.00  
By law, the court must keep the nature of these expenses confidential.



Debtor 1

GIOVANNI MARIN IRIZARRY

First Name

Middle Name

Last Name

Case number (if known) 19-04547-13

28. **Additional home energy costs.** Your home energy costs are included in your non-mortgage housing and utilities allowance on line 8.

If you believe that you have home energy costs that are more than the home energy costs included in the non-mortgage housing and utilities allowance, then fill in the excess amount of home energy costs.

\$0.00

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

29. **Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than \$170.83\* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.

\$0.00

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

\* Subject to adjustment on 4/01/22, and every 3 years after that for cases begun on or after the date of adjustment.

30. **Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.

\$0.00

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).

+ 80.00

Do not include any amount more than 15% of your gross monthly income.

32. **Add all of the additional expense deductions.**

Add lines 25 through 31.

\$230.00

#### Deductions for Debt Payment

33. **For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33g.**

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Average monthly payment

#### Mortgages on your home

33a. Copy line 9b here..... → \$ 775.00

#### Loans on your first two vehicles

33b. Copy line 13b here. .... → \$ 753.00

33c. Copy line 13e here. .... → \$ 0.00

33d. List other secured debts:

Name of each creditor for other secured debt

Identify property that secures the debt

Does payment include taxes or insurance?

COOPERATIVA A/C CE ENTRO GUB. MINILLAS

☒ No

\$ 0.00

☐ Yes

AEELA T ACCOUNT DEBTOR 1

☒ No

\$ 0.00

☐ Yes

See continuation sheet See cont. sheet

☐ No

+ \$ 737.22

☐ Yes

33e. Total average monthly payment. Add lines 33a through 33d. .... \$2,265.22

Copy total here →

\$2,265.22

Debtor 1

GIOVANNI MARIN IRIZARRY

First Name

Middle Name

Last Name

Case number (if known) 19-04547-13

**34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?**



No. Go to line 35.



Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
		\$ _____ ÷ 60 =	\$ _____
		\$ _____ ÷ 60 =	\$ _____
		\$ 0.00 ÷ 60 =	+ \$ 0.00
Total			\$ 0.00

Copy  
total  
here →

\$ 0.00

**35. Do you owe any priority claims—such as a priority tax, child support, or alimony—that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.**



No. Go to line 36.



Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims. .... \$ 0.00 ÷ 60 \$ 0.00

**36. Projected monthly Chapter 13 plan payment**

\$ 230.00

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

x 10.0%

Average monthly administrative expense

\$ 23.00

Copy  
total  
here →

\$ 23.00

**37. Add all of the deductions for debt payment. Add lines 33g through 36.**

\$ 2,288.22

**Total Deductions from Income**

**38. Add all of the allowed deductions.**

Copy line 24, All of the expenses allowed under IRS expense allowances..... \$ 5,245.91

Copy line 32, All of the additional expense deductions..... \$ 230.00

Copy line 37, All of the deductions for debt payment..... + \$ 2,288.22

Total deductions

\$ 7,764.13

Copy  
total  
here →

\$ 7,764.13

Debtor 1

GIOVANNI MARIN IRIZARRY

First Name

Middle Name

Last Name

Case number (if known) 19-04547-13

**Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)**

39. **Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period.** ..... \$ 7,812.00

40. **Fill in any reasonably necessary income you receive for support for dependent children.**

The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.

\$ 0.00

41. **Fill in all qualified retirement deductions.** The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).

\$ 0.00

42. **Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A).** Copy line 38 here ..... ➔ \$ 7,764.13

43. **Deduction for special circumstances.** If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Describe the special circumstances

Amount of expense

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ + \$ \_\_\_\_\_

Total

\$ 0.00

Copy here



+

\$ 0.00

44. **Total adjustments.** Add lines 40 through 43. .... ➔ \$ 7,764.13 Copy total here ➔ - \$ 7,764.13

45. **Calculate your monthly disposable income under § 1325(b)(2).** Subtract line 44 from line 39.

\$ 47.87**Part 3: Change in Income or Expenses**

46. **Change in income or expenses.** If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 22C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
<input type="checkbox"/> 22C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 22C-2	_____	_____	_____	<input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 22C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 22C-2	_____	_____	_____	<input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 22C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 22C-2	_____	_____	_____	<input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 22C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 22C-2	_____	_____	_____	<input type="checkbox"/> Decrease	\$ _____

Debtor 1

GIOVANNI MARIN IRIZARRY

First Name

Middle Name

Last Name

Case number (if known) 19-04547-13

**Part 4:**

**Sign Below**

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

**X** /s/ GIOVANNI MARIN IRIZARRY

Signature of Debtor 1

Date 01/30/2020  
MM / DD / YYYY

**X** /s/ WALESKA OLIVO SANTIAGO

Signature of Debtor 2

Date 01/30/2020  
MM / DD / YYYY

## Form 22 Continuation Sheet

Income Month 1			Income Month 2		
Gross Wages, Salary & Tips			Gross Wages, Salary & Tips		
Rents & Real Property Income			Rents & Real Property Income		
Interest & Dividends			Interest & Dividends		
Pension & Retirement			Pension & Retirement		
Contributions to Household Exp			Contributions to Household Exp		
Unemployment			Unemployment		
Other Income			Other Income		

Income Month 3			Income Month 4		
Gross Wages, Salary & Tips			Gross Wages, Salary & Tips		
Rents & Real Property Income			Rents & Real Property Income		
Interest & Dividends			Interest & Dividends		
Pension & Retirement			Pension & Retirement		
Contributions to Household Exp			Contributions to Household Exp		
Unemployment			Unemployment		
Other Income			Other Income		

Income Month 5			Income Month 6		
Gross Wages, Salary & Tips			Gross Wages, Salary & Tips		
Rents & Real Property Income			Rents & Real Property Income		
Interest & Dividends			Interest & Dividends		
Pension & Retirement			Pension & Retirement		
Contributions to Household Exp			Contributions to Household Exp		
Unemployment			Unemployment		
Other Income			Other Income		

### Additional Items as Designated (if any)

33f: SISTEMA DE RETIRO - \$111.22

SISTEMA DE RETIRO DEBTOR 1

33f: FIRST BANK OF PUERTO RICO - \$626.00